

Complete this supplement in its entirety and submit with the completed Use Permit application form to the address below:

City of Hampton Community Development Department, Planning Division 22 Lincoln Street, 5th Floor Hampton, Virginia 23669

OFFICE USE ONLY Date Received:
Case Number: UP

Lot Width	Lot Depth	Total Lot Area	Total Lot Area (ac. or sq. ft.)		
Current Number of On-site Parking Spaces		_ Proposed Number of On-site Parking Spaces			
☐ Please attach a s	sketch showing the parking a	rea and the circula	ation to, from and	within the parking lot	
2. BUILDING INFORM	IATION				
Square Footage		Stories	Number of Kitchens		
Number of Guest Rooms Number of Toilets Number of W				ashbasins	
Current primary use of	the building				
Is this currently an occu	ıpied residence? ☐ Yes ☐ I	No			
Is this proposed to be o	ccupied by the owner or othe	er non-guest as his	s/her residence? [⊒Yes □ No	
Type of Construction: [☐ Wood Frame with Siding	☐ Wood Frame with Brick		■ Masonry	
Ţ	☐ Other (describe)				
3. OPERATIONAL INF	FORMATION				
Number of Employees					
Hours of Operation: Mo	on Tue	Wed	d	Thu	
Fr	i Sat	Sun			